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/ 13									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 29, 1999													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMA Typ	LL ENT	_	OR		R THAN ENTITY
FOR		NUMB	UMBER FILED		NUMBER EXTRA		RAT		EE 1		RATE	FEE	
BASIC FEE .								34	5.00	OR	A	690.00	
TOTAL CLAIMS			23	3 minus 20= · 3			· · · · · · · · · · · · · · · · · · ·	X\$ 9=			OR	X\$18=	~:A
INDEPENDENT CLAIMS			6	minus 3 = 3				X39	<del></del>			X78=	120
MULTIPLE DEPENDENT CLAIM PRESENT								1 —			OR		221
- 11	* If the difference in column 1 is less than zero, enter "0" in column 2								=		OR		
	CLAIMS AS AMENDED - PART II								r		OR	TOTAL	178
(Column 1) (Column 2) (Column 3)								SMA	LL ENTI	TY (	)R	OTHER SMALL	
AMENDMENT A		REM/	AIMS AINING TER DMENT		N PRE	IGHEST UMBER EVIOUSLY ND FOR	PRESENT EXTRA	RATI	ADI TION	VAL		RATE	ADDI- TIONAL FEE
	Total	. 38		Minus	**	27	=  5	X\$ 9			OR	X\$18=	
AME	Independent	. 7		Minus	***	1	=	X39=			ŀ	X78=	
_	FIRST PRES	ENTATIO	N OF M	ULTIPLE DE	PENDE	NT CLAIM				-1	DR		
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		(Oak	41					ADDIT. F			R ,	TOTAL ADDIT. FEE	
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MENDMENT B		AF	INING TER DMENT		NI PRE	UMBER VIOUSLY ID FOR	PRESENT EXTRA	RATE	ADE TION FEI	IAL		RATE	ADDI- TIONAL FEE
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		(Colu	mn 1)		(Col	umn 2)	(Column 3)	ADDIT. FE	E <b>L</b>		'' А	DDIT, FEE	
MENI C		CLA REMA AFT AMEND	INING ER		HI( NU PRE\	SHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA	RATE	ADD TION	AL	ſ	RATE	ADDI- TIONAL FEE
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1,032	<del></del>	$\dashv^{\circ}$	H	^/o=	
• If	the entry in colum	nn 1 is les	s than the	entry in color	nn 2 w	ita M² in act.		+130=		OF	₹ [	+260=	<u> </u>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE IS less than 3 enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE IS less than 3 enter "3."													

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 12/99)

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